| PATENT APPLICATION FEE DETERMINATION RECO   |  |  |                                  |                      |                       |   |       |              | Application or Docket Number |          |            |                    |         |      |
|---|--|--|----------------------------------|----------------------|-----------------------|---|-------|--------------|------------------------------|----------|------------|--------------------|---------|------|
| Effective October 1, 2000 139, 751, 835   |  |  |                                  |                      |                       |   |       |              |                              |          |            | 1                  |         |      |
| CLAIMS AS FILED - PART I  |  |  |                                  |                      |                       |   |       |              | ENTITY                       |          | OTH        | ER THAN            | 1       |      |
|   | TOTAL CLAIM                                    | S  | 200                              |                      |                       | (Column 2)                                      |       | RATE FE      |                              |          | R SMA      | LL ENTITY          |         |      |
| FOR   |  |  | NUMBE                            | NUMBER FILED         |                       | NUMBER EXTRA                                    |       | BASICE       | _                            |          | RATI       |                    | 1       |      |
| TOTAL CHARGEABLE CLAIMS   |  |  | 22 "                             | De minus 20m ·       |                       | 0   |       | X3 9:        |                              | ~_ °     | BASICE     | <del></del>        | 4       |      |
| Ŀ   | NDEPENDENT                                     | 6  |                                  |                      | . 3                   |   |       | ╼╂╌╂         | _ <b> </b> °                 | R X\$18  |            | 4                  |         |      |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |  |                                  |                      |                       |   | 1     | X40=         | 44                           | _ 0      | R X80=     | 240                | 1       |      |
| " If the difference in column 1 is less than zero, enter "0" in column 2            |  |  |                                  |                      |                       |   | 3     | +135=        |                              | _ 0      | R +270=    | · <del> </del>     | l       |      |
| CLAIMS AS AMENDED - PART II   |  |  |                                  |                      |                       |   |       | TOTAL        | - 1                          | _]°      | R TOTAL    | 950                | 1       |      |
| (Column 1) (Column 2) (Column 2)  |  |  |                                  |                      |                       |   |       | SMALI        | LENTITY                      | r Of     | SHTO       | R THAN<br>L ENTITY |         |      |
|   |  | REMAINING<br>AFTER                         |                                  | PIGHE<br>NUMB        | ER                    | PRESENT   | 1     |              | ADDI                         |          |            | ADDI-              | 開       | ;    |
|   | 7-4-1  | AMENDMENT                                  |                                  | PREVIO               |                       | EXTRA   | ]     | RATE         | TIONA                        | т        | RATE       | TIONAL             | Charge  | (D)  |
| AMENDMENTA  | Total<br>Independent                           | اهظ  | Minus                            | 1:2                  | 0                     | = 2.  |       | X\$ 9=       | ·                            | O.F      | X\$18-     |                    |         |      |
| P   | FIRST PRES                                     | ENTATION OF M                              | Minus                            | "G                   | ~ 4114                | -   |       | X40=         |                              | OF       | You        | 1                  | ▶       | 8/05 |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                  |                      |                       |   |       |              |                              | 7        |            | 1                  | Allable | 19   |
| 116/06 max  |  |  |                                  |                      |                       |   |       | +135=        | -                            | OR<br>OR | L          | 200                | 6       |      |
| _   | 17192  | (Column 1)                                 |                                  | (Columi              |                       | (Column 3)                                      | , - ' | ADDIT. FEE   | L                            | _104     | ADDIT. FE  |                    | 111     |      |
| 8   | and the  | REMAINING<br>AFTER                         |                                  | NUMBE                | 37<br>28              | PRESENT   | 1     |              | ADDI-                        | 7        |            | ADDI-              | CO      |      |
| Ě   | Total  | AMENDMENT                                  |                                  | PAID FO              | XR.                   | EXTRA   |       | RATE         | TIONAL<br>FEE                | 1        | RATE       | TIONAL             | Ç       |      |
| AMENDMENT B   | Total<br>Independent                           | · <u>28</u>                                | Minus                            | · 2                  | }                     | • (q  |       | X\$ 9=       |                              | OR       | X\$ ==     | 300.00             | ·       |      |
| ₹   | FIRST PRESE                                    | NTATION OF MI                              | Minus<br>B.TIPLE DE              | *** (                | 1                     |   |       | X40=         |                              | OR       | 2.00       | 200.00             |         |      |
|   |  |  |                                  | CHOCK! C             | COM                   |   |       | +135=        |                              | 1        |            | 0,00.              |         |      |
|   |  |  |                                  | ٠                    |                       | •   | L     | YOTAL        |                              | OR       | YOTAL      | - CMD - D          |         |      |
| _   | · · · · · · · · · · · · · · · · · · ·          | (Column 1)                                 |                                  | (Column              | 2)(                   | Column 3)                                       | A     | DOIT. FEE    |                              | JOH      | ADDIT. FEE | 500.00             |         |      |
| ENT C   |  | CLAIMS<br>REMAINING<br>AFTER               |                                  | NUMBER               | i                     | PRESENT   | Г     |              | ADDI                         | 1        |            | ADDI-              |         |      |
| KE  |  | AMENDMENT                                  |                                  | PREVIOUS<br>PAID FOI | TA                    | EXTRA   | L     | RATE         | TIONAL<br>FEE                |          | RATE       | TIONAL             |         |      |
| AMENDIA   | Total<br>Independent                           |  | Minus                            | ••                   | _ !                   |   | Γ     | X\$ 9=       |                              | OR       | X\$18=     | FEE                |         |      |
| ₹   |  | TATION OF MU                               | Minus                            | ENDENT CI            | <u> </u>              | <u>`_</u>                                       | r     | X40=         |                              | •        | X80=       |                    | •       |      |
|   | 125  |  |                                  |                      |                       |   |       |              |                              |          |            |                    |         |      |
| " If the Total Marriage Province that the entry in column 2, write "O" in column 3. |  |  |                                  |                      |                       |   |       |              |                              |          |            |                    |         |      |
| 7   | mutteetgile era i<br>dewitteetgile eri         | ther Previously Paid<br>or Previously Paid | d For IN THIS<br>For (Total or I | SPACE is les         | s than 3<br>s the hir | o, erter ZV."<br>), erter Z."<br>Thest cumber ! | ADI   | AIT EEE      |                              | OR A     |            |                    |         |      |
| XXX   | PTO-675  |  |                                  |                      |                       |   |       | and ethbu    |                              | *U 006/  | mn 1.      |                    |         |      |
| on 8  | 90)  |  |                                  |                      |                       | P   | واحتا | and Tractema | A Office 11.5                | . DEPA   | THENT OF   | OUNEOUS            |         |      |

"U.S. GEPO: 2000-460-706/20103